

# City of Carmel

# Door-to-Door Vendor Application

#### General License Information (office use only)

y Code, Di						
plication	<b>Submission Date:</b>	/ /	/			
cense Issu	ie Date: / /	Li	cense Exp	iration D	ate:	/ /
Paid?	Yes No Surety B		Yes 🗍		icense #	
npany / (	Organization Inform	<u>ation</u>				
Length of	License Requested: 10 Day		120 Day	From:	/ /	to / /
Company	/ Organization Name:					
Name of S	Supervisor in Charge:					
Address:						
City:		State		Zip:		
Business 1				d/or Mobile		
If a vehicl	e(s) is to be used, how many ve	ehicle id	entification o	cards will be	needed?	
Description	on of goods or services to be off	fered:				
citor In	formation (#1) For additiona		refer to page 2			
citor In			refer to page 2	T)		(MI)
citor In	formation (#1) For additiona			T)		(MI)
	formation (#1) For additiona			T)		(MI)
Name: Street Ad- City:	formation (#1) For additiona (LAST) dress:		(FIRS	Zip:		
Name: Street Ad	formation (#1) For additiona  (LAST)  dress:  Home #:	al solicitors,	(FIRS		Fe	(MI)
Name: Street Ad- City:	formation (#1) For additiona  (LAST)  dress:  Home #:  If older than 14 but less than 18, pleas	al solicitors,	(FIRS		Fe	
Name: Street Ad City: Work #:	formation (#1) For additiona  (LAST)  dress:  Home #:  If older than 14 but less than 18, pleas Indiana Work Permit	State	e: Male:			
Name: Street Ad- City:	formation (#1) For additional (LAST)  dress:  Home #:  If older than 14 but less than 18, pleas  Indiana Work Permit in compliance with Indiana Code 20-8	State	e: Male: SSN:		D	emale:
Name: Street Ad City: Work #: Age: Height	formation (#1) For additiona  (LAST)  dress:  Home #:  If older than 14 but less than 18, pleas Indiana Work Permit	State	e: Male:		De Ha	emale:
Name: Street Ad City: Work #:  Age: Height Place of B	(LAST)  dress:  Home #:  If older than 14 but less than 18, pleas Indiana Work Permit in compliance with Indiana Code 20-8 Weight:	State	e: Male: SSN:		De Ha	emale:  OB: / / air Color:
Name: Street Ad City: Work #:  Age: Height Place of B ARREST	(LAST)  dress:  Home #:  If older than 14 but less than 18, pleas  Indiana Work Permit in compliance with Indiana Code 20-8  Weight:  irth (include city & state):  RECORD	State Se attach 8.1-4	e:  Male:  SSN:  Eye Color:	Zip:	DO H: R:	emale:  OB: / / air Color: ace:
Name: Street Ad City: Work #:  Age: Height Place of B ARREST Have you	(LAST)  dress:  Home #:  If older than 14 but less than 18, pleas Indiana Work Permit in compliance with Indiana Code 20-8 Weight: irth (include city & state):	State	e:  Male:  SSN:  Eye Color:	Zip:	De Ha	emale:  OB: / / air Color: ace:
Name: Street Ad City: Work #:  Age: Height Place of B ARREST Have you of a crimi	If older than 14 but less than 18, pleas Indiana Work Permit in compliance with Indiana Code 20-8 Weight: irth (include city & state): RECORD ever charged & Convicted nal offense?	State se attach 8.1-4 Yes:	e:  Male:  SSN:  Eye Color:	Zip:	DO H: R:	emale:  OB: / / air Color: ace:
Name: Street Ad City: Work #:  Age: Height Place of B ARREST Have you of a crimi Charging	If older than 14 but less than 18, pleas Indiana Work Permit in compliance with Indiana Code 20-8 Weight: irth (include city & state):  RECORD ever charged & Convicted	State Se attach 8.1-4  Yes:	e:  Male:  SSN:  Eye Color:	Zip:	DO H: R:	emale:  OB: / / air Color: ace:
Name: Street Ad City: Work #:  Age: Height Place of B ARREST Have you of a crimi Charging DRIVER	If older than 14 but less than 18, pleas Indiana Work Permit in compliance with Indiana Code 20-8 Weight: irth (include city & state): CRECORD ever charged & Convicted nal offense? Agency & Date of Conviction:	State Se attach 8.1-4  Yes:	e:  Male:  SSN:  Eye Color:	Zip:	DO H: R:	emale:  OB: / / air Color: ace:
Name: Street Ad City: Work #:  Age: Height Place of B ARREST Have you of a crimi Charging DRIVER Current Di	If older than 14 but less than 18, pleas Indiana Work Permit in compliance with Indiana Code 20-8 Weight: irth (include city & state): RECORD ever charged & Convicted nal offense? Agency & Date of Conviction: S LICENSE INFORMATIO	State Se attach 8.1-4  Yes:	e:  Male:  SSN:  Eye Color:	Zip:	DO H: R:	emale:  OB: / / air Color: ace:

### **Solicitor Information (#**

	(LAST)	(FIRST)	(MI)
Name:			
Street Add	dress:		
City:	State	2:	Zip:
Work #:	Home #:	Male:	Female:
Age:	If older than 14 but less than 18, please attach Indiana Work Permit In compliance with Indiana Code 20-8.1-4	SSN:	DOB: / /
Height	Weight:	Eye Color:	Hair Color:
Place of B	irth (include city & state):		Race:
ARREST	RECORD		,
Have you	ever been arrested? Yes: No	: If yes,	date of arrest: / /
Arresting	Agency & Court Date:		
Have you	ever been convicted of driving while in	ntoxicated?	Yes: No:
If yes, dat	e of conviction: / /		
Arresting	Agency & Court Date:		
DRIVER	S LICENSE INFORMATION		
Current Dr	river's License Number:		
Driver's L	icense Expiration Date:	_	
Restriction	s on Current Driver's License:		
-	_		

## Solicitor Information (# )

	(LAST)	(FIRST)	(MI)
Name:			
Street Ad	dress:		
City:	State	2:	Zip:
Work #:	Home #:	Male:	Female:
	If older than 14 but less than 18, please attach		
	Indiana Work Permit	CON	DOD / /
Age:	In compliance with Indiana Code 20-8.1-4	SSN:	DOB: / /
Height	Weight:	Eye Color:	Hair Color:
Place of B	Sirth (include city & state):		Race:
ARREST	RECORD		
Have you	ever been arrested? Yes: No	: If yes,	date of arrest: / /
Arresting	Agency & Court Date:		
Have you	ever been convicted of driving while is	ntoxicated?	Yes: No:
If yes, dat	e of conviction: / /		
Arresting	Agency & Court Date:		
DRIVER	S LICENSE INFORMATION		
Current Di	river's License Number:		
Driver's L	icense Expiration Date:		
Restriction	ns on Current Driver's License:		

#### **Signatures**

I affirm under the penalties of perjury that best of my knowledge, informat	ion and bel	representations a ief, this	are true to theday of
	Signature of A	pplicant	
	Please Print Na	ame	
<u>Notice</u> : If there are any falsifications or If, after your license is issued, we receive refusal to leave or other undesirable beh	ive complaints	of rudeness, for	cible tactics,
Each licensee shall be restricted to con 10:00 a.m. to 7:00 p.m. durin	U	•	U
RECOMMENDATION:	Approv	al	
	Disapprov	al	
<b>Chief of Police</b>		-	
		-	
Date			